INSTITUTE OF TECHNOLOGY AUSTRALIA

AGENT APPLICATION FORM

CRICOS: 03042K
www.iota.edu.au
info@iota.edu.au
+61 882126799

For becoming an agent of Institute of Technology Australia (ITA), please complete this form print it and send it for processing with signature and valid referees on it.

Agent Details			
A Sole Proprietor ☐		Name of Proprietor:	
or a Partnership Firm ☐		Name/Names of Partners:	
or an incorporated company or ☐		Registered Name:	
		Trading as if different:	
		Name/names of Director:	
		Place of Registration:	
		Date of Registration:	
		Expiry Date:	
ABN or any equivalent Number		Australian ABN Number:	
		Or any equivalent Number:	
Head Office Address:			

Contact Details	
Name of Chief Operating Officer:	
Phone:	Mobile:
Name of Main Contact Person:	
Phone:	Phone:
Email:	Fax:
Website:	Mobile:

Organisational Profile		
Number of Offices:	Location:	
Member of any Professional or industry body/bodies:		
Your most Client interested in: please tick relevant boxes:		
☐ Vocational Education	☐ Certificate	☐ Diploma
☐ Full Time	☐ IT Skill	☐ IT Knowledge
☐ others	Comments:	

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Organisational Profile Continues…

Representing Australian Educational Institutions:

Name of Institution	Representing since	Number of students recruited till date
1		
2		
3		

Does your organisation represent any other countries Educational Institutions?

Name of institution	Country	Representing since
1		
2		

References

Must provide two references (at least one referee must be an Australian educational Institution)

1. Company:	
Contact Person:	Position:
Email:	Contact Number:

2. Company:	
Contact Person:	Position:
Email:	Contact Number:

Declaration

I confirm that the information provided on this application is true and accurate to best of my knowledge. I also authorise Institute of Technology Australia (ITA) to contact referees. I acknowledge that approval of our application is conditional on issuance and signing of 4.3 and 4.3.1 Agent Agreement between Institute of Technology Australia and _____

(Agent Name) in accordance with National Code 2007. I am interested in representing Institute of Technology Australia as an education agent and I agree to do so in an honest and professional manner.

Agent Signature: Date:

Name: Position:

Office Use Only

Please Return Competed form along with Business profile and Business registration to:

Agent Approved on:	Email: info@iota.edu.au
Approved By:	Tel: + 61 8 8212 6799
Agent Code:	P.O Box: 3610 Rundle Mall South Australia 5000